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SECURITIES AND EXCHANGE COMMISSION HECHIVE

Washington, D.C. 20549

FORM D

OMB Number: 3235-0076 Expires: April 30, 2008 Estimated average burden hours per response 16.00

OMB APPROVAL

SEC USE ONLY Prefix Serial **DATE RECEIVED**

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. **SECTION 4(6), AND/OR** ... FORM LIMITED OFFERING EXEMPTION

Name of Offering (check if this is an amendment and name has changed, and ind	icate change.)
Senior Secured Convertible Promissory Note; Conversion Shares issuable upon conv	ersion thereof; Warrant to Purchase Preferred Stock;
Conversion Shares issuable upon Exercise thereof	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506	Section 4(6) ULOE
Type of Filing: New Filing Amendment	
A. BASIC IDENTIFICATION	DATA
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indica	te change.)
DataHooks, Inc.	- ·
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
2729 Debbie Court, San Carlos, CA 94070-4323	(650) 218-5710
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices) Same	Same
Brief Description of Business	
Design and manufacture of semiconductor components	
Type of Business Organization	
☐ limited partnership, already formed	other (please specify):
☐ business trust ☐ limited partnership, to be formed	PHOCESSED
Month Year	- O-OOLD
Actual or Estimated Date of Incorporation or Organization: 0 6 0 6	Actual Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service ab	Mactual ☐ Estimated DEC 1 5 2006
CN for Canada; FN for other foreign ju	risdiction) DE THOMSON
GENERAL INSTRUCTIONS	I MANCIAL)

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

> Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

• Each general and mana Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if i Natsoulis, Georges	ndividual)				
Business or Residence Address DataHooks, Inc., 2729 Debbie		nd Street, City, State, Zip arlos, CA 94070-4323	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, if i Rienhoff, Jr., Hugh Y.	ndividual)				
Business or Residence Address DataHooks, Inc., 2729 Debbie		nd Street, City, State, Zip arlos, CA 94070-4323	Code)		
Check Box(es) that Apply:] Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if i Tolley, Alexander Michael	ndividual)				
Business or Residence Address DataHooks, Inc., 2729 Debbie		nd Street, City, State, Zip arlos, CA 94070-4323	Code)		
Check Box(es) that Apply:] Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if i	ndividual)				
Business or Residence Address	(Number an	nd Street, City, State, Zip	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if i	ndividual)				
Business or Residence Address	(Number an	nd Street, City, State, Zip	Code)		
Check Box(es) that Apply:] Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if i	ndividual)	,			
Business or Residence Address	(Number an	nd Street, City, State, Zip	Code)		
Check Box(es) that Apply:] Promoter	☐ Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, if i	ndividual)				
Business or Residence Address	(Number an	d Street, City, State, Zip	Code)		
	(Use blank sl	heet, or copy and use addi	tional copies of this sheet.	, as necessary.)	

•				B. II	FORMAT	TON ABO	UT OFFE	RING					
1. Has the	issuer sold	l, or does th			, to non-acc			-			Yes	No	
2. What is	the minim	um investm					_				\$1.00		
3. Does th	ne offering	permit joint	ownership	of a single	unit?		•••••		· • • • • • • • • • • • • • • • • • • •		Yes 🖂	No	
commis offering with a persons	he informatession or sing. If a person state or states of such a leading to the such a lea	milar remu on to be list tes, list the proker or de	neration for ed is an ass name of the ealer, you n	or solicitati sociated per e broker o	on of purc rson or ager r dealer. It	chasers in nt of a brok f more than	connection er or deale five (5) pe	with sales r registered ersons to be	of securi with the S listed are	ties in the EC and/or	:		
Full Name	(Last name	e first, if in	dividual)										
Business o	r Residence	e Address (Number and	l Street, Ci	ty, State, Z	(ip Code)							
Name of A	Associated E	Broker or D	ealer										
	Vhich Perso												
(Check	All States" [AK]	or check in [AZ]	(AR)	(CA]	[CO]	[CT]	IDE1	[DC]		[GA]	rm	All States [ID]	
[IL]	[IN]	[IA]	[KS]	[KY]	[CO] [LA]	[C1] [ME]	[DE] [MD]	[MA]	[FL] [MI]	[MN]	[HI] [MS]	(MO)	
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	(VA)	[WA]	įwvj	įwij	[WY]	[PR]	
Full Name	(Last name	e first, if in	dividual)										
Business o	r Residence	Address (Number and	l Street, Ci	ty, State, Z	Cip Code)				_			
Name of A	Associated F	Broker or D	ealer		· · · • · · · · · · · · · · · · · · · ·	· · · · · ·							
	Vhich Perso								<u> </u>		•		
	All States"												
[AL] [IL]	[AK]	(AZ)	(AR)	[CA]	[CO]	[CT]	[DE]	[DC]	(FL)	[GA]	(HI)	[ID]	
[IL] [MT]	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]	
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
Full Name	(Last name	e first, if in	dividual)	-	 .							<u>. </u>	
Rusiness	т Residence	Address (Number and	1 Street Ci	ty State 7	in Code)							
Dusiness	r residence	. Muitos (vanioer and	i Sirect, Ci	iy, State, Z	np code)							
Name of A	Associated E	Broker or D	ealer										
	Vhich Perso					urchasers		<u> </u>					
	All States"											All States	
[AL] [IL]	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA]	[CO]	[CT]	(DE)	[DC]	[FL]	[GA]	[HI]	[ID]	
[MT]	[NE]	[NV]	[HN]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]	
[RI]	[SC]	[SD]	[TN]	[TX]	(UT)	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Amount Already Aggregate Offering Price Type of Security Sold Debt \$0.00 \$0.00 \$0.00 ☐ Common ☐ Preferred Convertible Securities (including warrants) \$250,000.00 \$250,000.00 Partnership Interests \$0.00 \$0.00 Other (Specify _ \$0.00 \$250,000.00 Answer also in Appendix, Column 3, if filing under ULOE. 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number Dollar Amount Investors of Purchases Accredited Investors 1 \$250,000.00 0 Non-accredited Investors \$0.00 Total (for filings under Rule 504 only)..... Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. **Dollar Amount** Type of Type of offering Security Sold Rule 505..... Regulation A Rule 504..... a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees \$0.00 Printing and Engraving Costs \Box \$0.00 Legal Fees X \$20,000.00 Accounting Fees \$0.00 Engineering Fees \$0.00 Sales Commissions (specify finders' fees separately)..... \$0.00 Other Expenses (identify) ______ \$0.00

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

Total

\$20,000.00

X

	- T			
	C. OFFERING PR	RICE, NUMBER OF INVESTORS, EXPENS	ES AND USE OF PROCEE	DS
	and total expenses furnished in response to	ate offering price given in response to Part C - Part C - Question 4.a. This difference is the	e "adjusted	\$230,000.00
5.	of the purposes shown. If the amount for any to the left of the estimate. The total of the p	ss proceeds to the issuer used or proposed to be used purpose is not known, furnish an estimate and chapments listed must equal the adjusted gross proceeds to the large process.	eck the box	
	issuer set forth in response to Part C - Question	n 4.b above.	Payments to Officers, Directors, & Affiliates	Payments t Others
	Salaries and fees		<u>\$0.00</u>	\$0.00
	Purchase of real estate		<u>\$0.00</u>	\$0.00
	Purchase, rental or leasing and installati	ion of machinery and equipment	🔲 \$0.00	\$0.00
	Construction or leasing of plant building	gs and facilities	<u>\$0.00</u>	\$0.00
	Acquisition of other business (including	the value of securities involved in this		
	offering that may be used in exchange f		_	
	issuer pursuant to a merger)		····· 🗀 <u>\$0.00</u>	\$0.00
	Repayment of indebtedness		<u>\$0.00</u>	
	· ·		<u>\$0.00</u>	∑ <u>\$230,000.00</u>
	Other (specify):			
	· -		□ <u>\$0.00</u>	□ <u>\$0.00</u>
	Column Totals	•••••	<u>\$0.00</u>	
	Total Payments Listed (column totals ac	ided)	🛛 \$230	0,000.00
		D. FEDERAL SIGNATURE		
fo	llowing signature constitutes an undertaking l	signed by the undersigned duly authorized per by the issuer to furnish to the U.S. Securities ar to any non-accredited investor pursuant to para	nd Exchange Commission, up	
	suer (Print or Type) ataHooks, Inc.	Signature No	Date December	4,2006
N:	nme of Signer (Print or Type)	Title of Signer (Print or Type)		· · · · · · · · · · · · · · · · · · ·
ъ	atrick A. Pohlen	Secretary		

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)